Best Available Copy

| | FEE 740.00 |
|--|--|
| FOR NUMBER FILED NUMBER EXTRA BASIC FEE 370.00 OR BASIC FE TOTAL CHARGEABLE CLAIMS // minus 20= * X\$ 9= OR X\$18: INDEPENDENT CLAIMS // minus 3 = * X42= OR X84= | E 740.00 |
| TOTAL CHARGEABLE CLAIMS // minus 20= * X\$ 9= OR X\$18: INDEPENDENT CLAIMS // minus 3 = * X42= OR X84= MULTIPLE DEPENDENT CLAIM PRESENT | - |
| INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PRESENT X42= OR X84= | |
| INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PRESENT X42= OR X84= | |
| MULTIPLE DEPENDENT CLAIM PRESENT | |
| | 1 |
| * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL | 740 |
| CLAIMS AS AMENDED - PART II OTHI | R THAN ENTITY |
| CLAIMS REMAINING AFTER AMENDMENT Total Total Total Minus Min | ADDI- TIONAL FEE |
| Total - Minus - 20 = X\$ 9= OR X\$18 | |
| Independent * Minus *** 2 = X42= OR X84= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= OR +280 | |
| TOTAL OR ADDIT. FEE OR ADDIT. F | |
| (Column 1) (Column 2) (Column 3) | |
| Total To | ADDI- TIONAL FEE |
| Total | <u>: </u> |
| Independent * 3 Minus *** 3 = X42= OR X84= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= OR +280 | |
| TOTAL ADDIT FEE OR ADDIT F | |
| ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE | - |
| CLAIMS HIGHEST PRESENT ADDI- | ADDI- TIONAL FEE |
| AFTER AMENDMENT PRIOR PREVIOUSLY PAID FOR STATE TIONAL FEE STRA PREVIOUSLY PAID FOR STATE TIONAL FEE STRA PRIOR TOTAL FEE STRAND TOTAL | - |
| Independent * 2 Minus *** 3 = X42= OR X84: | |
| PIRST PRESENTATION OF MULTIPLE DEPENDENT COMM | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | |
| ** If the entry in Column 1 is east team to entry in Column 1 is east team 20, enter *20.* ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter *20.* ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter *3.* The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | |

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Application or Docket Number